PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10748305

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
TOTAL CLAIMS			(Column 1)		(Column 2)		י	TYPE		OR	SMALL	SMALL ENTITY	
TOTAL CLAIMS			26					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			26 minus 20=		• 6			X\$ 9=		OR	X\$18=	108	
INI	DEPENDENT C	LAIMS	minus 3 =		* 0			X43=		OR	X86=		
Мι	JLTIPLE DEPEN	NDENT CLAIM P					+.145=		OR	+290=			
* If	the difference	e in column 1 is	less than ze	s than zero, enter "0" in co			L	TOTAL		OR	TOTAL	878	
	С	OTHER THAN											
(Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	- C/ A/A	= .		X43=		OR	X86=		
<u> </u>	FIRST PRESE	NTATION OF M	JLTIPLE DEF	ENDENT	CLAIM		J [+145=		OR	+290=		
							L	TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)								IDDII. FEE I		•	ADDII. PEEI		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVICE PAID I	EST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Ind pendent	*	Minus	***		=]	X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						┚┞	+145=		OR	+290=		
								TOTAL		L	TOTAL		
								DDIT. FEE		OR ,	ADDIT. FEE		
<u> </u>		1 _			_								
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		<u> </u>		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290= TOTAL		
**	f the "Highest Nur	mber Previously Pa mber Previously Pa	id For IN THIS	SPACE is	less than	20, enter *20.	A[TOTAL ODIT. FEE		OR ,	ADDIT. FEE		
		ber Previously Paid					er foun	d in the app	ropriat box	in col	umn 1.		